File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073

Reset Form

RECEIVED EMAIL JAN 18 2009

FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SLIMMARY PAGE

144.010201-070	DISCLOSUR	RE SUMMARY PAGE			
COMMITTEE NAME (Must b	e same as on Statement of O	Organization)			
IMPORTANT: Indicate by # type	of committee you are reporting for	- BOSOSS		FORM DR-2	DISCLOSURE
(1)Statewide/Legislative/Judge (4)County Central Committee (1) Subdivision Candidate (8)Coun 11) Local Ballot Issue	5 KCOURITY Candidate (R VCity Ca	 (2)State PAC (3)State Party indidate (7)School Board or Other Political soll Board or Other Political Subdivision PAC 	, <u>F</u>	Rev. 07/2007) or Office Use On	1(1)
CANDIDATE COMMITTEES Candidate Name	ONLY:	Political Party (if applicable)	L		
Office Sought		District (if Senate or House)			
Late reports are subject to possi	ble civil and criminal penalties.	Pursuant to lowa Code sections 68B.32A	(7) and 6	BA.401(3), the car	ndidate, for a
SIGNATURE OF PERSON FIL	ING REPORT	712-485-2658 TELEPHONE	****	11-26- DATE SI	OS GNED
AM FILING A Oct 15	- Dec 31-20	118 REPORT FOR (1) ELECTION	/(2)NON-	ELECTION VE	. С
(re	eport date)	Indicate by	* []	ELECTION 1EA	IK.
CHECK IF AMENDMENT TO	O REPORT DATED	•			
		1	Local Com	imittees, enter Dat	e of Election
Check if this is final (termins (You must continue to	ation) report and attach Notice of file reports until a DR-3 is file	art X	which Elec	ocal Committees, tion is held IFAWATTAN	
STATEM	ENT OF CASH ON HAN	ND C			
CASH ON HAND at the beginn committee. This amo	ing of the reporting period. (1	Total of all funds held by the		,213	80.83
	TAKEN IN THIS PERIOD	,	•		
Schedule A: Cash Co	entributions total (Attach Sche	edule A) (*also see in-kind below)			
		le F)		<u> 500</u>) . [®]
		ttach Schedule H)			
(Schedule H	applies to Candidates' Con	mmittees Only)			
		SUB-TOTAL	\$		
SUBTRACT TOTAL I	MONEY SPENT THIS PERIO	00			
Schedule B: Expendi	lures total (Attach Schedule E	3) (**also see debts and loans below)		2138	.45
Schedule F: Loan Re	payments total (Attach Sched	tule F)		492	2.67
ASH ON HAND at the end of	this reporting period (if final re	eport balance must be zero)	S	0	
UNPAID BILLS (From Sched	ule D - Attach Schedule D)	***************************************	\$		
N KIND CONTRIBUTIONS (F	rom Schedule E - Attach Sch	edule E)	\$		
		dule F)			
ONSULTANT BREAKDOWN			_	YES N	10
ANDIDATE COMMITTEES O	NLY:				
ALUE OF CAMPAIGN PROP	ERTY (From Schedule H - At	tach Schedule H)	\$		
TATE COMMITTEES: Submi	t a reconciled campaign acco	ount bank statement in January of each	year.		

FOR INSTRUCTIONS,	SEE BACK OF FORM
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Reset Form

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE MONETARY (Rev. 07/03) **EXPENDITURES**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

CHECK THIS BOX IF AMENDING FORM

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/17/0	NUMBER ID# CK# 1037	Neola Gazette	Advertisment	\$ 53.15
10/17/08	ID# CK#/038	Botna Valley Reporter	Advertisment	107. 50
10/17/08	ID# CK#/039	Avoca burnal	. 11	465.00
10/20/08	CK# ₁₀ 40	Nonpareil	1	987,50
10/20/08	ID#	Nonpareil	11	435,00
11/26/08	CK#1042	State of Java	fine	100.09
12/24/01	ID#	Dean Tischer	Repayment from	492.0
***************************************	ID# CK#			
	1	1	SUB-TOTAL	\$

TOTAL (if last page of this schedule)

THIS BOX APPLIES	TO CA	NDIDATES'	COMMITTEES	ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page_		of	
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MMITTEE NAME(M	fust be same as on Statement of Organization)	RESET	F LOAN RECEI & REP
	eports money loaned to the committee which is deposited S FROM <u>LAST</u> REPORTING PERIOD S		CHECK THIS BO AMENDING FOR
RT I - MONETARY (Original sour	LOANS RECEIVED <u>THIS</u> REPORTING PERIOD roe of loan, such as a bank, must be shown if a third part)	is involved. Include loans from candid	date's personal funds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
80/17/08	Dean Fracture 28950 298m Juna da 57559		500.90

	Y LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PER ven must be reported on Schedule E In-kind Contribution		\$ 5 00 ,∞
		IOD	AMOUNT REPAID
(Loans forgit	ven must be reported on Schedule E - In-kind Contribution NAME AND ADDRESS OF LENDER	OD Ons.)	AMOUNT REPAID
(Loans forgit	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	OD Ons.)	AMOUNT REPAID
(Loans forgit	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	OD Ons.)	AMOUNT REPAID
(Loans forgit	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	OD Ons.)	AMOUNT REPAID

(for Schedule F)

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.